

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 744698	RECEIPT DATE:	01 / 29 / 01
IA NUMBER:	PCT/ US99 / 16950	IA FILING DATE:	07 / 27 / 99
FAMILY NAME:	KIRWAN	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	JOHN M.	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	07 / 27 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	F0397/7050	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

NAME: TIMOTHY J OYER  
WOLF GREENFIELD & SACKS  
STREET: 600 ATLANTIC AVENUE

CITY: BOSTON  
STATE/COUNTRY: MA ZIP: 02210  
EMAIL:

APPLICATION TITLES:  
UNIVERSAL MODULAR SURGICAL APPLICATOR SYSTEMS

TAB TO LAST POSITION,PUSH SEND